

Atty. Docket No.: 30394-4

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	Group Art Unit:	2141
Hideharu OGAWA)		
Serial No.:	09/938,807)	Examiner: DHARIA, Rupal
Filed:	August 24, 2001)	Confirmation No.: 2170
For:	SERVER DEVICE AND METHOD FOR PROVIDING E-MAIL SERVICE, AND INFORMATION RECORDING MEDIUM RECORDING A PROGRAM FOR REALIZING THE SERVICE)	

San Diego, California
July 30, 2004

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

STATUS INQUIRY

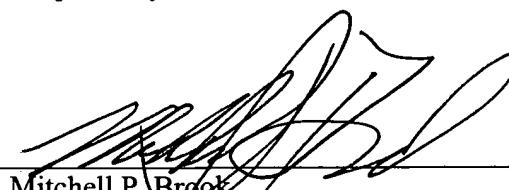
Dear Sir/Madam:

The above-identified patent application was filed on August 24, 2001. We are writing to inquire about the status of the application. An indication of when the first Office Action might be received would be appreciated.

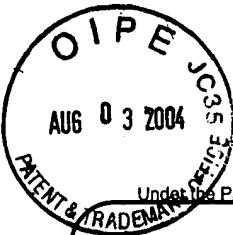
Respectfully submitted,

Date

7/30/04


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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

	Application Number	09/938,807	
	Filing Date	August 24, 2001	
	First Named Inventor	Hideharu OGAWA	
	Art Unit	2141	
	Examiner Name	DHARIA, Rupal	
Total Number of Pages in This Submission	2	Attorney Docket Number	30394-4

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input checked="" type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
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<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Mitchell P. Brook (Reg. No. 32,967) Luce, Forward, Hamilton & Scripps LLP
Signature	
Date	July 30, 2004

CERTIFICATE OF TRANSMISSION/MAILING

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Typed or printed name	Amy M. Sheridan	
Signature		Date
	July 30, 2004	

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